

# Texas Title V Transition Workgroup (TTVTW) *Five Year Strategic Plan*

## TTVTW MISSION & VISION

- MISSION** To promote a collaborative approach to the provision of transition services for youth in Texas with disabilities and special health care needs and their families.
- VISION** Successful transition outcomes for all youth in Texas with disabilities and special health care needs and their families.

## STRATEGIC ISSUES

1. Opportunities for the development and empowerment of youth and young adults with special health care needs (YYASHCN) are unknown or unavailable
2. Physicians and other providers caring for adults are not always considered stakeholders
3. Pediatricians and other pediatric providers lack training and/or resources to facilitate successful transitions to adulthood
4. Family members of YYASHCN are not always provided the resources and education necessary to ensure a successful transition for their child
5. There is a lack of knowledge and utilization of best practices\* related to transition
6. Youth without medical homes are less likely to successfully transition to adulthood

## BEST PRACTICES\* & THEORETICAL FRAMEWORKS

- Standards for Systems of Care for Children and Youth with Special Health Care Needs<sup>1</sup>
- The Six Core Elements of Health Care Transition 2.0<sup>2</sup>
- Life Course Framework
- National CLAS Standards<sup>3</sup>

## FOUNDATIONAL ACTIVITIES

- Education
- Support
- Engagement & Recruitment
- Assessment
- Promotion of Best Practices\*
- Collaboration

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<sup>1</sup> <http://www.amchp.org/programsandtopics/CYSHCN/Documents/Standards%20Charts%20FINAL.pdf>

<sup>2</sup> <http://www.gottransition.org/resourceGet.cfm?id=206>

<sup>3</sup> <https://www.thinkculturalhealth.hhs.gov/content/clas.asp>

\* Best practices related to transition include but are not limited to the resources and references listed under *Best Practices & Theoretical Frameworks*

## STRATEGIC PLAN TABLE

GOALS	STRATEGIES	OBJECTIVES
<p><b>Engage youth and young adults with special health care needs (YYASHCN), their families, physicians and other providers in efforts to improve the transition care of YYASHCN</b></p> <p><u>Strategic Issues Addressed:</u>  <i>Opportunities for youth development and empowerment are unknown or unavailable</i></p> <p><i>Physicians and other providers caring for adults are not always considered stakeholders</i></p>	<ul style="list-style-type: none"> <li>Assess level of YYASHCN and/or family participation in member organization project planning</li> <li>Support implementation of best practices* related to family-professional partnership within member organizations' strategic planning, programming, and operations</li> </ul> <hr/> <ul style="list-style-type: none"> <li>Assess physicians caring for adults' engagement in transition advancement activities and barriers to participation</li> <li>Develop an action plan for the identification and recruitment of physicians caring for adults who are interested in participation in the TTVTW</li> </ul> <hr/> <ul style="list-style-type: none"> <li>Identify and recruit YYASHCN and their families, pediatricians, physicians caring for adults, and other providers interested in participation in the TTVTW</li> </ul>	<ul style="list-style-type: none"> <li>By February of 2016, engage 70% of member organizations to complete a survey on the inclusion of YYASHCN and family perspectives in project planning</li> <li>By 2020, increase the number of member organizations reporting that they engage YYASHCN and family perspectives in project planning by 5%</li> </ul> <hr/> <ul style="list-style-type: none"> <li>By May of 2016, engage physicians caring for adults to complete a survey including engagement and barriers to participation in transition advancement activities</li> <li>By September of 2016, develop a plan to engage physicians caring for adults in participating in the TTVTW</li> </ul> <hr/> <ul style="list-style-type: none"> <li>By 2020, increase YYASHCN participating in the TTVTW by 2 members</li> <li>By 2020, increase family members of YYASHCN participating in the TTVTW by 8 members</li> <li>By 2020, increase pediatricians participating in the TTVTW by 8 members</li> <li>By 2020, increase physicians caring for adults participating in the TTVTW by 4 members</li> <li>By 2020, increase other providers participating in the TTVTW by 8 members</li> </ul>

GOALS	STRATEGIES	OBJECTIVES
<p><b>Educate YYASHCN, their families, physicians, and other providers about transition services</b></p> <p><u>Strategic Issues Addressed:</u>  <i>Pediatricians and other providers lack training and/or resources to facilitate successful transitions to adulthood</i></p> <p><i>Family members of transition-age youth are not always provided the resources and education necessary to ensure a successful transition for their child</i></p> <p><i>There is a lack of knowledge and utilization of best practices* related to transition</i></p>	<ul style="list-style-type: none"> <li>Assess YYASHCN and/or their families, and physicians' understanding of transition</li> </ul> <hr/> <ul style="list-style-type: none"> <li>Educate and reach out to YYASHCN and/or their families, and physicians to improve understanding of transition</li> <li>Support the implementation of best practices* related to transition services</li> </ul>	<ul style="list-style-type: none"> <li>By May of 2016, engage YYASHCN to complete a survey to assess level of understanding of transition</li> <li>Utilize 5 Year Needs Assessment Data as a baseline for family understanding of transition</li> <li>By May 2016, engage pediatricians and physicians caring for adults to complete a survey to assess level of understanding of transition</li> </ul> <hr/> <ul style="list-style-type: none"> <li>By 2020, increase the number of YYASHCN and/or their families who are provided education on transition by 2%</li> <li>By 2020, increase the number of pediatricians provided education on transition by 2%</li> <li>By 2020, increase the number of physicians caring for adults who are provided education on transition by 2%</li> </ul>

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**Increase statewide medical home capacity to provide integrated and coordinated care for YYASHCN**

- Collaborate with the MHWG to assess YYASHCN, their families, and physicians understanding of medical home

- By May of 2016, engage YYASHCN and their families to complete a survey to assess level of understanding of medical home
- By May of 2016, engage pediatricians and physicians caring for adults to complete a survey to assess understanding of medical home

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Strategic Issues Addressed:  
*Youth without medical homes are less likely to successfully transition to adulthood*

- Collaborate with the MHWG to educate and reach out to YYASHCN, their families, and physicians to improve understanding of medical home
- Support the implementation of best practices\* related to medical home services

- By 2020, increase the number of YYASHCN and their families who are provided education on medical home by 2%
- By 2020, increase the number of pediatricians provided education on transition by 5%
- By 2020, increase the number of physicians caring for adult patients who are provided education on transition by 5%

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- Support initiatives increasing medical home capacity

- By 2020, increase the number of physicians who are provided support in medical home transformation by 5%